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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. **01-501**

First Inventor or Application Identifier **KOYASU**

Title **INTEGRATED CIRCUIT FOR TRANSCEIVER DEVICE WITH MEANS FOR SUPPRESSING SUPERIMPOSED NOISE AND FOR GENERATING A MORE ACCURATE OUTPUT SIGNAL**

Express Mail Label No. _____

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Mail Stop Patent Application
Alexandria, VA 22313-1450

U.S.PTO
10/6/022
22154

103003

- | | |
|---|---|
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original and a duplicate for fee processing)</i> | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) |
| 2. <input checked="" type="checkbox"/> Specification [Total Pages 58] | 6. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i> |
| -Descriptive title of the Invention | |
| -Cross Reference to Related Applications | |
| -Background of the Invention | |
| -Summary of the Invention | |
| -Brief Description of the Drawings | |
| -Detailed Description of the Preferred Embodiment | |
| -Claims | |
| -Abstract of the Disclosure | |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11] | 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 4. Oath or Declaration [Total Sheets 3] | 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement
<i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy) | 9. <input type="checkbox"/> English Translation Document (if applicable) |
| b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))
<i>(for continuation/divisional with Box 16 completed)</i> | 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | 11. <input type="checkbox"/> Preliminary Amendment |
| NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28) | |
| 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(should be specifically itemized)</i> | |
| 13. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired | |
| 14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> | |
| 15. <input type="checkbox"/> Other: | |

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____

Prior application information: Examiner _____

Group/Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23400	or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here.)</i>
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

Name (Print/type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701
Signature		Date	October 30, 2003

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 810)

Complete if Known

Application Number	
Filing Date	October 30, 2003
First Named Inventor	KOYASU
Examiner Name	
Art Unit	
Attorney Docket No.	01-501

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account

50-1147

Deposit Account Number
Deposit Account Name

POSZ & BETHARDS, PLC

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	770
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$ 770)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
20	-20**=	0	18
Independent Claims 3	-3**=	0	86

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	**Reissue independent claims over original patent
1205 18	2205 9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

** or number previously paid, if greater; For Reissues, see above

Other fee (specify)	
*Reduced by Basic Filing Fee Paid	SUBTOTAL (3) (\$ 40)

Complete (if applicable)

Name (Print/Type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Signature				Date	October 30, 2003

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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